



PENNSYLVANIA LUMBERMENS MUTUAL INSURANCE COMPANY

INDIANA LUMBERMENS MUTUAL INSURANCE COMPANY

ONE COMMERCE SQUARE ▪ 2005 MARKET ST, SUITE 1200 ▪ PHILADELPHIA, PA 19103
PHONE 267.825.9350 FAX 267.825.9349 scho@plmins.com
ATTN: MARKETING DEPARTMENT

DIVIDEND ELECTION FORM

Today's Date

PLM/ILM Policy #

Company Name

Address

City, State, Zip

Contact

Email *(please provide)*

Phone Number

- Please enroll me into the WPMA Safety Group Dividend Program, effective immediately. I understand that this is the only Safety Group Plan underwritten by PLM/ILM that I will be participating in. If I am currently enrolled in another Safety Group Plan underwritten by PLM/ILM, I will be removed from that plan and placed into the WPMA Safety Group Dividend Plan.**
- No, I do not wish to participate.**

Signature

Date